NOTICE OF INTENDED ACTION

Pursuant to the authority of Iowa Code section 231.23, the Department on Aging proposes to Rescind Chapter 21, "Case Management for Frail Elders" and adopt a new Chapter 21 with the title "The Service of Case Management," Iowa Administrative Code.

The proposed changes will update rules relating to the provision of the service of case management including updating criteria for service providers, updating the explanation of the service process and requirements, clarifying the client discharge and transfer process, updating the monitoring and follow-up process, updating the Documentation necessary, and updating the records retention.

Any interested person may make written comments on the proposed amendments on or before November 429, 2016. Comments should be directed to Brian Majeski, Iowa Department on Aging, Jessie Parker Building, 510 East 12th Street, Suite 2, Des Moines, Iowa 50319. Comments may also be sent by e-mail to Brian.Majeski@iowa.gov.

These amendments do not provide for waivers in specified situations because requests for the waiver of any rule may be submitted under the Department's general rule on exceptions found in Chapter 11, "Waivers or Variances from Administrative Rules."

After analysis and review of this rule making, no impact on jobs has been found.

The following chapter is intended to implement Iowa Code section 231.23A.

Rescind 231—Chapter 21 and adopt the following **new** chapter in lieu thereof:

CHAPTER 21

The Service of Case Management

17—21.1(231) Authority. This chapter implements the service of case management as provided in Iowa Code section 231.23A and the OAA.

17—21.2(231) Purpose. This chapter sets out consumer eligibility, covered services, program administration and program standards to assist clients in coordinating the use of the long-term living continuum which ranges from the independent access of congregate services to the delivery of support services in the home and facility based care for individuals served. The service of case management is designed to promote and support independent living of older Iowans funded through the Title III (Grants to State and Community Programs on Aging) of the Federal Older Americans Act (OAA) or State General Funds distributed to the Area Agencies on Aging based upon their current area plan.

17—21.3(231) General Requirements for Providers of Case Management Services.

21.3(1) Qualifications to provide the service of case management. The individual providing the service of case management shall have at a minimum of one of the following qualifications

a. Hold a bachelor's degree in the human services field, including, but not limited to: social work, sociology, special education, rehabilitation counseling, and psychology,

b. Hold an associate's degree and two years' full-time equivalent work experience in a human services field involving direct contact with service to people in overcoming social, economic, psychological or health problems, or;

c. Hold a license as a registered nurse in Iowa.

21.3(2) Continuing Education Requirements for the provider of the service of case management. The individual providing the service of case management shall;

a. Attend during the term of employment annual and other case management training as required by the department.

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- d.b. Obtain 8 hours of relevant training annually. If 8 hours of training is not provided in accordance with a, the individual shall document training related to the provision of geriatric case management. Documentation shall be included in the individual's personnel record.
- e.c. Attend during the term of employment annual and other case management training as required by the department.
- f.d. Each AAA shall ensure that all providers of the service of case management complete the Mandatory Reporter requirements within 90 business days of hiring in accordance with Iowa Code 235b.
- **21.3(3) Background Checks.** Each AAA shall ensure and document that all individuals providing the service of Case Management have a background check:
- a. Prior to beginning employment, all potential providers of the service of case management, shall successfully complete a criminal and abuse background checks.
- b. A background check includes, at a minimum, a request that the Iowa Department of Public Safety perform a criminal history check and the department of human services perform child and dependent adult abuse record checks of the applicant in this state.
- c. If the applicant has an unfavorable criminal background check or abuse check, they shall not provide services under this chapter.
- **21.3(4) Contracting for Case Management Services.** An AAA may contract with an outside entity for the provision of the service of case management
- a. The outside entity and individual providing the service of case management shall be subject to and comply with any applicable state or federal laws and regulations including this chapter.

<u>b.</u> The department shall have access to all records related to the service of case management and all related facilities of the contractor for monitoring purposes.

b.c. The AAA shall monitor the case management entity in accordance with 17 IAC 6.10.

17—21.4(231) Case Management service activities minimally include the following components:

- **21.4(1) Case Finding Activities:** The identification of individuals for intake into the service of case management.
- **21.4(2) Intake:** Through the administration of a defined intake process developed or approved by the IDA, an individual with potential case management needs, as defined below, shall be identified.
 - a. Is a legal resident of the State of Iowa;
 - b. Is aged 60 or older;
- c. Is in need of the service of case management based on a needs assessment as described under 17 IAC 21.4(3);
- d. Is funded through the Title III (Grants to State and Community Programs on Aging) of the Federal Older Americans Act (OAA) or State General Funds distributed to the Area Agencies on Aging based upon the Area Agencies on Aging area plan; and
- e. Is not entitled to receive case management services or case management service reimbursement from another source

21.4(3)Needs Assessment: A face-to-face comprehensive assessment, preferably conducted in the home or place of residence of the client, must be conducted for each case management client utilizing a standardized tool, developed or approved by the IDA, to evaluate the conditions of the client and to identify goal oriented needs for services and/or problems needing resolution.

21.4(4)Service Plan Development: A written plan of care shall be prepared for each client utilizing appropriate and available formal and informal resources, using a standardized form developed or approved by the IDA.

- a. The service plan shall be developed within 30-20 Calendar days of the Needs Assessment.
- b. The service plan shall identify available services and problem solving efforts to meet the client's determined needs and to enable the client to live with maximum possible independence.
- c. A copy of the service plan shall be given to the client and/or client's family and/or significant individual, and so documented in the client's file.

21.4(5)Service Plan Implementation: A referral of the applicant/client to an appropriate resource for service provision and/or problem resolution shall be made and documented in the applicant's/client's file. If the referral is made to an informal network (family, friends, etc.), the service and/or problem-solving arrangement agreed to regarding duties and responsibilities shall be documented in the client's service plan. The following activities shall be performed for each client, as appropriate and needed:

- a. Active intervention and advocacy on behalf of the client to access necessary services from community organizations and to resolve problems experienced by the client;
- b. Establishment of linkages with service providers for the prompt and effective delivery of services needed by the client, including submission of instructions for service delivery to the appropriate service providers;
- c. Encouragement of informal care given by individuals, family, friends, neighbors, and community organizations, so that publicly supported services supplement rather than supplant the roles and responsibilities of these natural support systems.

21.4(6) Review and Evaluation of Client Status:

- a. **Follow-up:** Periodic-Monthly monitoring of each client shall be conducted through telephone or face-to-face contact to ensure prompt and effective service delivery and response to changes in the client's needs and status. All follow-up shall be documented in the client's file.
- b. **Reassessment:** A face-to-face needs assessment of the client's condition and needs must be conducted in accordance with 21.4(3), preferably in the home of the client, no later than the 12th month from the last completed needs assessment. This needs assessment must be conducted more frequently as directed by change in the client's circumstance identified in follow-up or report from third party.

21.4(7) Client Discharge:

- a. A client shall be discharged from the service of case management when any one of the following situations has occurred:
 - (1) The client dies;
 - (2) The client moves out of state;

- (3) The client moves into a nursing facility and the stay is expected to be permanent;
- (4) The client or the client's legal representative requests termination of case management service;
 - (5) The client is unwilling or unable to adhere to the agreed-upon service plan;
- (6) The client or the client's legal representative refuses to provide access to information necessary for the development or implementation of the service plan;
- (7) The client's needs cannot be met in a way that ensures the client's health, safety and welfare;
- (8) The client's goals are achieved and the client no longer requires the service of case management;
- (9) The client becomes eligible for a comparable case management service from another funding source; or
- (10) The AAA determines that funding is no longer available to provide the service of case management.
- b. An individual identified by the AAA shall be notified and approve all discharges prior to initiation of discharge action.
- c. If the discharge is due to the circumstances given in subrule 21.4(7)(a), paragraphs "5" through "9," the AAA providing the service of case management shall provide a thirty day written notice to the client or the client's legal representative stating the reasons for the discharge from case management and include the process for appealing the decision in accordance with 17 IAC 6.10.

- 21.4(8)Transfer: When a client moves from the AAA's geographic service area, the AAA shall, with the client's and/or client's family and/or significant individual's documented consent, refer the client to the AAA serving the area to which the client has moved.
- **21.4(9) Monitoring and follow-up**. The AAA shall and the Department may monitor and follow-up with providers of the service of case management. Monitoring shall be conducted to determine whether:
- a. Services are being furnished in accordance with the client's service plan, including the amount of service provided, client's attendance, and the client's participation in the service.
 - b. The client has declined services in the service plan.
 - c. Communication is occurring among all providers to ensure coordination of services.
- d. Services in the service plan are meeting the identified needs of the client, including the client's progress toward achieving the goals and actions determined in the service plan.
- e. Monitoring shall include accessing and assessing the client, the places of service (including the client's home when applicable), and all services.

21.4(10) Records and Documentation

- a. A Case Management Service provider shall maintain individual client records in a paper file or in a Case Management software database approved by the department. The case file for each client shall minimally include the following information:
 - (1) Intake Form(s);
 - (2) Comprehensive Needs Assessment;
 - (3) Copies of Release of Information (If needed)
 - (4) Service Plan;

- (5) Record of referral(s) and request(s);
- (6) Correspondence related to the case;
- (7) Formal case notes, which include documentation of the follow-up and/or case closure;
- b. Except by written consent of the consumer or the consumer's legal representative, the use or disclosure by any person of any information concerning a consumer for any purpose not directly connected with the administration of the responsibilities of the department, AAA or authorized service provider is prohibited.
- c. Upon change in AAA designation, the AAA which has been de-designated shall transfer all specified records as prescribed by the IDA to the newly designated AAA.